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Smart Living in the Summer

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Recipe: Mediterranean-style Grilled Salmon

Looking for the perfect dish for the barbecue season? Try this gem from the cooking wizards at the Mayo Clinic. It's delicious *and* healthy!

Ingredients Serves 4

- 4 tablespoons chopped fresh basil
- 1 tablespoon chopped fresh parsley
- 1 tablespoon minced garlic
- 2 tablespoons lemon juice
- 4 salmon fillets, each 5 ounces
- Cracked black pepper, to taste
- 4 thin slices lemon

Directions

Prepare charcoal or gas grill or broiler. Away from grill, lightly coat grill rack or pan with cooking spray. Position rack 4 to 6 inches from heat.

Combine basil, parsley, garlic and lemon juice. Spray fish with cooking spray. Sprinkle

with pepper. Top each fillet with equal amounts of basil-garlic mixture.

Place fish herb-side down on grill. Grill over high heat. When the edges turn white, after 3 to 4 minutes, turn fish over; place on aluminum foil.

Reduce heat or move fish to a cooler part of grill. Grill until fish is opaque throughout and an instant-read thermometer inserted into the thickest part of the fish reads 145 F (about 4 minutes longer). Remove salmon and put on warmed plates. Garnish with lemon slices.

Nutritional analysis per serving

Calories: 183, Protein: 28 g, Total fat: 9 g, Saturated fat: 1.5 g, Monounsaturated fat: 3 g, Cholesterol: 78 mg, Sodium: 105 mg, Total carbohydrate: 2 g



Smoking: Quitting at Any Age Helps

Have you smoked for what seems like *forever*? Figure you're too old to quit and have it make a difference? *Wrong!* A new report shows kicking butts at any age could help you live longer.

Researchers from the German Cancer Research Center (DKFZ) in Heidelberg, Germany, reviewed the results of 17 studies. They wanted to gauge the effect of smoking – and quitting – on longevity in the 60-and-over crowd. The studies ranged anywhere from 863 to 877,243 participants.

Smoking kills. The findings, published recently in the journal *Archives of Internal Medicine*: Current smokers were *83 percent more likely to die* at any given age than those in the same age group who never smoked.

The good news: Smokers who stopped lighting up – even after 60 – significantly cut their risk of death. Former smokers in that age group still had a greater chance – 34 percent – of dying than people who never smoked. But the odds continued to dip the longer ex-smokers went without cigarettes, according to the analysis.

One study reviewed showed 59 percent of non-smokers were alive at age 80, compared to 26 percent of smokers. Another study showed smokers who quit before age 40 had the same death rate as people who never smoked.

Researchers said that the analysis confirms it's never too late to quit (though the sooner you do, the better). And that people should be encouraged to do so, no matter their age – even if they've smoked for years with seemingly no consequences.

“Most smokers grossly underestimate their own risks. Many older smokers misbelieve that they are too old to quit or too old to benefit from quitting,” researcher Tai Hing Lam of the University of Hong Kong wrote in a commentary published with the report. “A simple, direct, strong and evidence-based warning is needed. If you...[help] two smokers quit, you have saved at least one life.”

So if you smoke – stop. Need help? Talk to your doctor, check out online smoking cessation programs and/or call the national smoking hotline at 1-800-QUIT-NOW!

Carpal Tunnel Syndrome

Spend a lot of time tapping away at a computer? Or doing other activities that require repetitive hand and wrist movements? If so, you may be at increased risk of carpal tunnel syndrome.

Carpal tunnel syndrome is a condition caused by pressure on the median nerve. The median nerve runs from the forearm to the hand through a snug passageway in the wrist called the carpal tunnel. When you move your hands and wrists the same way frequently and for long periods, tissue or tendons (connect bones to muscles) near the nerve may swell and press on it.

Symptoms. The median nerve controls feeling in the thumb and fingers other than the little one. (Another nerve controls feeling in the pinky.) So when it's pinched, you may feel tingling, weakness and/or pain in your hand, thumb and index, middle and ring fingers.



Risk factors. Many recreational and work-related activities can up risk. Among them: driving, knitting, typing and prolonged twisting of the wrist. People with arthritis and other health conditions like diabetes are at increased risk. So are people with previous wrist injuries (especially fractures). Obesity and pregnancy also up odds. Ditto smoking, because it slows blood flow to the median nerve.

Treatment. Carpal tunnel may be treated at home by applying ice, wearing a wrist splint at night (to take pressure off the median nerve) and/or taking anti-inflammatory medicines to reduce swelling. (*Check with your doctor before taking any meds.*) Surgery is an option. But should only be considered if other treatments fail.

Reduce risk. The best way to cut risk is to avoid activities that irritate your wrists and hands, not smoke, maintain a healthy weight, and keep medical conditions like arthritis in check by following treatment plans. It's impossible to avoid all potentially damaging activities. But it helps to take frequent breaks to rest, stretch and change positions of hands. It also helps to rearrange work space to reduce stress on hands and wrists.

Flu Shot Alert

You may still be thinking about barbecues and pool time. But fall is fast approaching. And with it school days – and, *sigh*, flu season. So be prepared. Make sure you get your flu shot – and any other vaccines you need.

The Centers for Disease Control and Prevention (CDC) recommends everyone over six months old get the flu vaccine. It's especially important for young children, people 65 and older, and individuals with asthma, diabetes, heart disease, COPD and other chronic health conditions.

It's also important for pregnant women, because the flu can hurt developing babies. The same goes for healthcare workers and caregivers so they won't infect the vulnerable babies, elderly and patients in their care.

And remember: The flu vaccine is seasonal. That means *you have to get it every year*. Last year's vaccine *won't protect you* against this year's flu.

The flu vaccine is given two ways: by injection or a mist sprayed in your nose. The shot is approved for people over six months of age. The mist is OK for healthy people 2 to 49 who are *not pregnant*.

Pneumonia vaccine. The CDC also recommends the PPSV (pneumococcal polysaccharide vaccine) for people 65 and over, people 2 to 64 with chronic health conditions or immune systems weakened by disease or meds, smokers 19 to 64 and residents of long-term care facilities.



Little Sleep: Stroke Risk

Well here's some news sure to keep you up at night. A new study found working middle-aged and older people who routinely get less than six hours of shut-eye a night are at greater risk of stroke – even if they're fit.

University of Alabama – Birmingham researchers followed 5,666 people ages 45 to 69 for three years. Participants were all normal weight and had no history of stroke or stroke symptoms at the outset of the study.

The findings, presented at a recent meeting of the Associated Professional Sleep Societies (APSS): Participants who regularly snoozed less than six hours a night were *four times more likely* to suffer a stroke. Lack of sleep remained



a major risk factor even after researchers adjusted for known stroke risks like obesity, smoking and lack of activity.

Strokes occur when blood to the brain is restricted or cut off. Symptoms may

include trouble walking, talking and understanding, numbness on one side of the body and/or face, sudden severe headache and/or trouble seeing in one or both eyes.

Study author Megan Rutter said this research is important, because many people know diet, not smoking and exercise are important in preventing strokes. But they're less aware of the toll too little sleep may take. The message: Getting your 40 winks is very important. The body is stressed when it doesn't get enough sleep, Rutter said.

Routinely toss and turn? Talk to your doctor. He/she can check for possible underlying causes like sleep apnea. To slumber soundly, the National Sleep Foundation recommends sticking to a bedtime routine, keeping sleep area dark and quiet, staying off the computer and avoiding caffeine and alcohol right before hitting the sack.

Apartments: Smoke Out

Live in an apartment? Noisy neighbors can be a drag. Ditto broken down elevators. But how about unwanted tobacco smoke?

A new study found tobacco smoke drifts out of apartments into hallways and other units, exposing neighbors to secondhand smoke.

Researchers surveyed apartment dwellers nationwide to see if they experience so-called *smoke incursion*. (Read: if they smell others' smoke in their building or unit.)



The findings, presented at a meeting of the Pediatric Academic Societies (PAS): *Nearly one-third* said they smelled smoke in their building. And half smelled it in their *own apartments*. About 12 percent smelled smoke daily. And 38 percent said they smelled it at least once a week.

"A significant number of residents are being unwillingly exposed to tobacco smoke," concluded lead study author Karen Wilson, an assistant professor of pediatrics at University of Colorado School of Medicine.

According to the latest U.S. Surgeon General's report on smoking, exposure to tobacco smoke – even occasional smoking or inhaling secondhand smoke – causes immediate damage that can lead to cancer, heart, lung and other diseases. It can raise children's asthma risk, researchers warned. And worsen symptoms of those who already have lung and other disorders.

Researchers said the study adds to growing evidence that *all buildings should be smoke-free* to protect shared indoor air that all tenants are forced to breathe.

Is your building smoke-free? If not, you may want to push to clear the air. Apartment hunting? Try to move into a smoke-free building. Your health – and your children's – could depend on it!

Protect Your Children's Health

Use this chart as a handy reference

Ask your doctor what's right for your children. CDC/ACIP Recommended Childhood & Adolescent Immunization Schedule 2012:

Age Group	Birth	1 mo	2 mo	4 mo	6 mo	12 mo	15 mo	18 mo	4-6 yrs	11-12 yrs
HepB: <i>Protects against Hepatitis B</i>	✓	Between 1-2 months		✓ If needed	Between 6-18 months					
HepA: <i>Protects against Hepatitis A</i>						Between 12-23 months (2 doses at least 6 months apart)			Certain high-risk groups	
Hib: <i>Protects against spinal meningitis</i>			✓	✓	✓ May be needed	Between 12-15 months				
DtaP: <i>Protects against diptheria, tetanus, and pertussis (whooping cough)</i>			✓	✓	✓		Between 15-18 months		✓	Tdap booster at 11-12; then every 10 years
Polio Vaccine			✓	✓	Between 6-18 months				✓	
MMR: <i>Protects against measles, mumps and rubella</i>						Between 12-15 months			✓	
Varicella Vaccine: <i>Protects against chicken pox</i>						Between 12-15 months			✓	
Flu Vaccine	Yearly for ages 6 months and older. Two doses, four weeks apart for kids 8 and younger being vaccinated for the first time or who were vaccinated for the first time the previous year and received only one dose.									
Pneumococcal Vaccine: <i>Protects against pneumonia, blood infections and meningitis caused by pneumococcus</i>			✓	✓	✓	Between 12-15 months			Certain high-risk groups	
Rotavirus (Rota) Vaccine: <i>Protects against dehydrating infection and stomach and intestinal inflammation</i>			✓	✓	✓ Not needed if given at 2 and 4 months					
Meningococcal Vaccine: <i>Protects against meningococcal meningitis</i>									Certain high-risk groups after age 2	✓
Human Papillomavirus (HPV): <i>Protects against HPV linked to cervical cancer and genital warts</i>										Females-HPV 3 doses at 11-12 or at 13-18 Males-HPV4 3 doses at 9-18

Preventive Recommendations for All Adults

Living healthy includes having the right tests and immunizations at the right time. Ask your doctor what's right for you.

Age Group	18-20	21-29	30-34	35-39	40-44	45-49	50-64	65-69	70+
Td Booster	one booster dose every 10 years								
HPV4 Vaccine (3 doses at 0, 2, 6 months apart)	Women 26 and younger and men 22-26 not previously vaccinated								
Flu Vaccine	one dose yearly – ask your doctor which vaccine type is best for your health conditions and age								
Hepatitis B Vaccine	3 doses over 6 months for those at risk of exposure (check with your doctor if you have diabetes)								
Hepatitis A Vaccine	2 doses over 6-18 months for those at risk								
MMR Vaccine	At least 1 dose for adults born in 1957 or later and not previously infected or vaccinated. (Some may need second dose.) <i>Don't get if pregnant or plan to become pregnant in the next four weeks. NOT for people with compromised immune systems.</i>						Certain high-risk groups		
Varicella (Chicken Pox) Vaccine	2 doses 4-8 weeks apart if not previously vaccinated or infected with chicken pox. <i>NOT for people with compromised immune systems or if pregnant or plan to become pregnant in the next four weeks.</i>								
Pneumococcal Vaccine	1 dose for anyone with chronic medical conditions or weakened immune systems. One dose revaccination after 5 years is recommended for conditions that affect the immune system. <i>Residents of nursing homes and smokers should be vaccinated.</i>						One dose if never vaccinated or if vaccinated ≥5 years ago under the age of 65		
Zoster (Shingles) Vaccine							One dose for adults aged ≥ 60 years		
Exams and Tests									
Physical Exams	Ask your doctor about frequency						Every 1-3 years (Exam should include kidney, liver and thyroid function)		
Dental Check-ups	At least yearly								
At least one of the following to screen for colon cancer:	Fecal Occult Blood Test (FOBT)*						Yearly	Yearly through age 75	
	Flexible Sigmoidoscopy*						Every 5 years	Every 5 years through age 75	
	Colonoscopy People with the following risk factors should ask their doctor about earlier and more frequent screening: Personal or family history of colorectal cancer or adenomatous polyps and/or chronic inflammatory bowel disease *All positive tests should be followed up with colonoscopy.						Every 10 years	Every 10 years through age 75	

Flu shot locator: Go to the following US Department of Health and Human Services website to locate flu shot clinics in your area: <http://www.flu.gov/individualfamily/vaccination/locator.html>